

**Best Available Copy**  
ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	2205	8-24-99
O.I.P.E. CLASSIFIER		10	3-29-99
FORMALITY REVIEW		71471	4/7

**INDEX OF CLAIMS**

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
-	(Through numeral)..... Canceled	A	..... Appeal
+	..... Restricted	O	..... Objected

Claim	Final	Original	Date
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36	27	0	
37	28	✓	
38	29	✓	
39	30	=	
40	31	✓	
41	32	=	
42	33	=	
43	34	=	
44	35	✓	
45	36	0	
46	37	0	
47	38	✓	
48	39	✓	
49	40	=	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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